## **Hawk Mountain Ranger School Supplemental Application**

This supplement must be completed and returned before you can be accepted.

Download this file to your computer and save as last name and CAPID (ie, Jones55555).

Complete the form, resave and email to <a href="mailto:rangerstaff@yahoo.com">rangerstaff@yahoo.com</a>. If you are having trouble saving the completed form please go to

http://www.pawg.cap.gov/sites/default/files/completed-form-print-options-CAP.pdf

Last name			_ First Name		CAPID	
Class, and posses	ss a profession	nal CPR certific	ation. Early	y registratio	ourse, have earned Ranger 2nd on is required since there may be ats will be accepted without a	
Please check all Specialty Qualifications and Certificates that you have obtained. You may be required to provide documentation.						
GES	_ GTM3	GTM2	_GTM1 _	GTL	GBD	
IC3	_ IC2	IC1	_BCut _	ACut	ICut	
					Basic ORM	
R3	_R2 _	R1	_RA _	Intermed	liate ORM	
OPSEC	OPSEC Basic First Aid (send copy)			Advanced ORM		
CPR/AED fo	r Adults, Infar	nts, and Children	(send copy)			
First Respond	der (send copy		EMT (send	copy)		
Any other medical training:						
You MUST have previous school(s	• •	orevious HMRS (	Course to app	ply to the Fi	eld Medic Course. Please your	
Year		Squadron		Summer or Winter?		
Answer YES or N	1O:					
I understa			S100, IS200,	IS700, IS80	0, Professional CPR certification	